SANITARY SEWER COLLECTION SYSTEM INSPECTION Inspector name: Eddy Bouzeid Inspector BG#: 34175 Inspector name: _____ Inspector BG#: Inspector name: Inspector BG#: TN0066800 Permit #: Inspection Date: 5-9-2017 System Name: Somerville Lagoon Bartlett City: Address: 6400 Stage Road, Bartlett, TN 38134 System Representative: Matt Crenshaw Position: Division Manager Phone number 901-385-5586 E-mail address mcrenshaw@cityofbartlett.org System Representative: Don Ervin Position: Field Supervisor Phone number 901-385-5586 E-mail address dervin@cityofbartlett.org Certified Operator: Matt Crenshaw Grade: Phone number 901-385-5586 E-mail address mcrenshaw@cityofbartlett.org **PART A** System Description (previous 12 months unless otherwise specified) 1. Service Area (of collection system): 23.4 sq. mi. 2. Population (last census or city survey): 58,200 people (2016 census) 3. Average Annual Precipitation: 55 inches 4. WWTF Design Flow: Organic 2.2 MGD Hydraulic 2.2 **MGD** Actual Flow (last 3 years): Average Flow (last 3 years) MGD Lowest 7 days of flow Peak Wet Weather flow 4.4 MGD 5. Number of Employees dedicated to maintenance inspection and repair of the collection system: 7 people committed to the collection system 6. Number of Service Connections: Residential 20.199 Commercial 68 Industrial none 7. Number of Satellite Communities (systems with separately maintained collection systems) 0 Who is responsible for the satellite community systems? (by contract/agreement?) NA 8. Is the sewer system combined? \square Yes \boxtimes No percent combined 9. Is the facility responsible for laterals? \boxtimes Yes \square No Describe any limitations. (see attachment) Bartlett is responsible for the 6 " lateral from the main to where the property owner connects. **System Inventory** 10. Number of Access Structures: Manholes (brick) + Manhole (concrete) 7374 11. Number of Pump Stations (obtain a list if possible): 12. Number of Inverted Siphons:

WATER/WASTEWATER LIFT STATION LOCATIONS

| LIFT STATION NAME | LIFT STATION ADDRESS | NO. OF PUMPS | 끍 | AMPS | VOLTS |
|----------------------------|---------------------------|--------------|-----|------|-------|
| Barret's Chapel Elem. Sch. | 10278 Godwin Rd | 2 | 15 | 44 | 217 |
| | 7708 Memphis Arlington Rd | 2 | 7.5 | 22.6 | 214 |
| Billy Maher | 5965 Old Brownsville Rd | 2 | 40 | 49 | 488 |
| Bolton | 7327 Brunswick Rd | 2 | 30 | 84 | 212 |
| Broadway | 4120 Broadway Rd | 2 | 2.5 | 9 | 245 |
| Brunswick | 5341 Brunswick Rd. | 2 | 30 | 81 | 213 |
| Buckhead | 8614 Hwy 70 | 2 | 10 | 26.5 | 480 |
| Davies Plantation | 8891 Davies Plantation | 2 | 7.5 | 22.6 | 215 |
| Garner | 2854 Bartlett Rd | 2 | 2 | 12.5 | 246 |
| Hollywood | 4385 Germantown Rd | 2 | 2.5 | 10.8 | 247 |
| Hunters Walk | 4650 Germantown Rd | 2 | 10 | 5 | 248 |
| Hwy 70 | 6658 Hwy 70 - | 2 | 51 | 14.2 | 208 |
| Mary Oaks | 3736 Memphis Arlington Rd | 2 | ယ | 74 | 245 |
| Raner Creek | 6314 Old Brownsville Rd | 3 | 25 | 18 | 495 |
| Raner Creek Sludge Press | 6314 Old Brownsville Rd | 2 | 15 | 33.6 | 495 |
| Rockyford | 6967 Old Brownsville Rd | 2 | 7.5 | 19.2 | 246 |
| Shadowlawn | 7805 Old Brownsville Rd | ω | 25 | 40 | 230 |
| Society | 4520 Society Rd | 2 | 5 | 13.5 | 460 |
| St. Philip | 3994 St. Philip | 2 | 25 | 33.6 | 491 |
| Sycamore Manor | 5930 Sycamore Manor Cv | 2 | З | 74 | 244 |
| The Valley | 8915 Old Brownsville Rd | 2 | 20 | 49.6 | 246 |
| Wolfchase (A) | 5215 Sawyer Lake | 2 | 15 | 10 | 497 |
| Wolfchase (B) | 5215 Sawyer Lake | 2 | 15 | 40 | 215 |
| | 7449 Vala Da | o | , | 1 | |

| 13. Number of Rel | iet Valves | s: Air | Vacuum | Air/Va | cuum <u>10</u> | |
|--|-------------|-----------------|----------------|-----------------|---------------------|-----------|
| | T C | | | | | ×2 |
| Collection System | | | approximate if | | | |
| 14. Length of Sewe | | • | - | 336 | | al miles) |
| Pipe Materials: Vit | | y Pipe | X | Polyvinyl Ch | | <u>x</u> |
| | ctile | _ | X | Iron /Cast Iro | n | X |
| Bri | | _ | | Concrete | 2 | X |
| HL | OPE: | _ | X | _Other: | | |
| Pump Stations | | | | | | |
| Facility Name | Age | # pumps | numn a | ges (yrs) | Design HQ | HP |
| 1 aciny ivame | nge | <i>н ритр</i> з | ритр а | ges (yrs) | Design 11Q | 111 |
| (see attachment) | | | | | | |
| (bee attachment) | | | | | | |
| | | | | | | |
| : | | | | | | |
| 9 | | | | | | |
| A Separate list may | be submi | itted | | | | |
| 1 | | | | | | |
| Preventative Main | ıtenance | | | | | |
| 15. Number of ded | icated staf | ff for Prever | ntative main | tenance 1 | 5 | |
| 16. Total length ins | spected in | the last 3 ye | ears. | 208,000 fe | et (40 miles) | |
| 17. Inspection and | | | | | · / | |
| ⊠CCTV | Ū | | Hydraulic Jo | | ⊠Chemical Root C | Control |
| ⊠Visual Manhole | Inspection | | Rod Machir | | ⊠Chemical/Biolog | |
| Smoke Testing | поросион | | Hand Roddin | | Grease Control | ,ioai |
| _ | adim a | | | • | Grease Control | |
| ⊠Dyed Water Floo | Jung | | Bucket Mac | nines | | |
| Emanganay Duana | nadnass | | | | | |
| Emergency Prepa 18. Describe the pr | | or roomandir | na to o oono | um nacandina an | CCO 2 2 2m2m2 | 24 2V |
| phone numbers | | | _ | | | Silcy |
| phone numbers | of city w | cosite, on-ca | an stan, with | responds to th | e event, etc. | |
| During work hours | all canits | ry sewer co | mnlaints ao | to Hot I ine 90 | 1_385_5586 Public | c Works |
| will dispatch a coll | | • | | | | |
| Emergency Prepare | • | | | | • | |
| review. | MICSS Wa | s described | in the bold | . A copy of the | SOM was availa | DIC 101 |
| TCVTCVV. | | | | | | |
| 19. Describe the pr | ocedures 1 | to limit / mi | tigate the SS | O? Lift station | s are inspected wee | ekly and |
| technicians con | | | | | is the mapeered we | one, and |
| teenmetans con | dact rout | ne mamore | поресстопо | | | |
| | | | | | | |
| | | | | | | |
| · | | | | | | |
| Procedures and T | raining | G. | | | | |
| 20. Is there a SORI | _ | □No | | | | |
| 21. Are staff provid | | | RP? ⊠Yes | □No | | |
| P. O . I . | | 0 | | | | |

| 22. How often is training updated? Annually 23. When was the SORP last updated? March 2017 24. Has city developed a program for maintenance and repair of the collection system (i.e. CMOM)? ⊠Yes □No |
|---|
| 25. Does the city have a sewer use ordinance? ⊠Yes □No |
| (a) Is there a limitation on fats, oils, and grease (FOG)? ⊠Yes □No |
| (b) Is there a prohibition against direct stormwater discharges? ⊠Yes □No |
| (c) Does it restrict other illegal discharges? ⊠Yes □No |
| Part B – File Review and Interview System Performance (last 3 yrs) 26. Are there any problematic areas of the city for overflows? Why? |
| Bartlett has concerns of the way new sewer lines are installed in new subdivisions. Bartlett has |
| identified those areas and were placed on routine inspenctions. |
| |
| |
| 27. Is the City under an Order with Collection System requirements? □Yes ⊠No 28. Comments: |
| |
| 29. Is the City under a Moratorium other than self-imposed? □Yes ⊠No 30. Comments: |
| |
| 31. Does the City have any areas where they have experienced greater than 5 overflows during the past 12-month period? □Yes ⊠No |
| a. If yes, has the City instituted a self-imposed moratorium? ☐ Yes ⊠No NA |
| 32. If the City is under a moratorium, how are they keeping track of connections? NA |
| |
| |
| |
| 33. How many overflows has the City reported during the last 3 years? 5 SSOs from the collection system |
| 34. Is each overflow adequately documented? ⊠Yes □No |
| 35. Is the information consistent with previously reported data? ⊠Yes □No |
| 36. Comments: |
| |
| 37. Are the number of overflows increasing or decreasing? |
| |

Emergency Preparedness

| 39. Is there evidence that the procedures described is actively used? Yes | for responding to a concern regarding an SSO | | |
|---|---|--|--|
| 40. Comments: | | | |
| 41. Is there evidence that the procedures described to used? | for limiting or mitigating an SSO is actively | | |
| 42. Comments: Yes. Degreaser are routinely on routine inspections. | used at lift stations and manholes are placed | | |
| 43. Do overflow records include the following infor of the form) NA | rmation? (check all that apply) (obtain a copy | | |
| ☑Type of event (wet- or dry-weather SSO) | ⊠Name of staff reporting event | | |
| ⊠ Date and time reported to DWR (website or phone) e-mail) | ⊠DWR staff contacted (or via website, or | | |
| ⊠Event start date and time | ⊠Event end date and time | | |
| | ⊠Structure (manhole or lift station ID) | | |
| ⊠Did overflow reach waters of the state? | ⊠Name of affected receiving water(s) | | |
| Stream monitoring conducted & documented | Impact to fish & aquatic life | | |
| ☐ Cause(s) of event | \boxtimes How the overflow was stopped | | |
| ⊠Remediation / mitigation efforts | ⊠Estimated flow & volume of discharge | | |
| Backup occurred into homes / businesses Public notice, signs or advisories | Volume contained or recovered Sensitive areas potentially impacted (parks, schools, campgrounds, etc. | | |
| Downstream water intakes notified | , 15 | | |
| 44. Are there means to limit public access to affecte 45. Comments: | | | |
| When an SSO occurs, public access is restricted. | cted until mitigation is completed | | |
| Procedures and Training 46. If a SORP is in place | | | |
| a. Is training properly addressed? <u>Yes</u> | | | |
| b. Is there evidence of proper implementation Comments: | | | |
| 47. If a CMOM is in place NA | | | |
| • • • • • • • • • • • • • • • • • • • | ? | | |
| b. Is there evidence of proper implementation. Comments: NA | | | |

| Does the City have a permit on file? ⊠Yes □No | | | | |
|--|--|--|--|--|
| Has the City properly maintained records for the past 3 years? ⊠Yes □No | | | | |
| 48. Does the city have a map of the collection system (paper or GIS)? ⊠Yes □No Last | | | | |
| Updated: GIS, whole system mapped, pipe sizes, manholes and lift stations. | | | | |
| Does the map include ⊠pipe sizes □pipe material ⊠pipe lengths | | | | |
| ☐ manhole depths ☐ manhole material ☐ manhole IDs ☐ location of past SSOs? | | | | |
| Comments: Bartlett was enhancing its GIS mapping to include manhole depths, manhole | | | | |
| material, pipe material and manhole IDs. | | | | |
| | | | | |
| | | | | |
| 49. Does the city have current operating and maintenance manuals? ⊠Yes □No Last Updated: | | | | |
| Comments: <u>Lift stations manufacturers' manuals.</u> | | | | |
| <u> </u> | | | | |
| 50. Is there documentation for yearly calibration of all flow meters? ⊠Yes □No at the lagoon | | | | |
| 51. If the city has a sewer use ordinance | | | | |
| (a) Does the city adequately enforce established restrictions on fats, oils, and grease | | | | |
| (FOG)? ⊠Yes □No | | | | |
| (b) Has the city had any difficulty in prohibiting Stormwater discharges into sewers under | | | | |
| the ordinance? \Box Yes \boxtimes No | | | | |
| (c) Has the city had any difficulties with illegal discharges? ☐ Yes ☒ No | | | | |
| (d) Can the city readily produce the ordinance? ⊠Yes □No | | | | |
| Comments: | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| · | | | | |
| 52. Discuss recent / current sewer extensions and/or construction permits: | | | | |
| Several construction developments were beginning to start (sewer extension): | | | | |
| Kirby Whitten north of Egypt Central | | | | |
| Commercial development around industrial park. | | | | |
| | | | | |
| | | | | |
| 53. Other comments: | | | | |

City of Bartlett Collection System Overflow Report Year **40** (6

System Month:

System Contact: _

County: Shelby Phone # (901)385-5570

5-30-16 5-30-16 START DATE 3-11-6 5-15-16 5820 Stage M. 5-23-16 5930 Stage Flavor 615 3-11-16 END DATE STOS Ackerns 2454 Boysen berry LOCATION 60 1,000 pm 1,450m 8:00 m 2:00 m 8:00 m 2:45 m 10:00 an START TIME Wisson. END TIME 1500gal 1500gal 300gal QUANITY (0)(0) was topped by the table and disinfected paid unit topped by the table of the table and disinfected selet braker, and repaired yelled main and disingered wasted main and unstopped and disinfected raid ACTION TAKEN

Signed: M&M

| LIST STATION AUGUST INT | | | |
|--|-----|-----|--|
| LIFT STATION CHECKLIST | | | |
| | | | |
| ····· | | | |
| KEY: N/A = Not Applicable; G = Good; F = Fair; P = Poor; X = Not Working | | | |
| | | | |
| Permit # MO | | | |
| Date | | | |
| 1. Name of station: 6658 Hwy 70 Hwy 20 Property 1a. Constructed under DNR CP: Yes No. 1b. Construction Date (year): (exception State of St | | | |
| 1. Name of station: 6580 Truck | | | |
| 1a. Constructed under DNR CP: Yes No. | | | |
| 1b. Construction Date (year): Celle City spragasia | | | |
| 2. Location: 66+6 Tu 9 70 | | _34 | |
| 3. Design capacity: 200 g m Actual flow: | | | |
| 4. # of pumps Motor AP, volts, phase | | | |
| 4a. Type of pumps: submersible; centrifugal; air lift: other | | | |
| 4b. Pump hours at time of inspection: 17258 pump! 1077 pump? | | | |
| 5. Does this station have a drywell? Yes_ No_ | | | |
| 5a Means of access: ladder; elevator; Other | | | |
| 6. Are screeningor grinding devices used? / // ' | | | |
| 6a. (If yes, attach appropriate checklist.) | | | |
| 7. Is area fenced padlocked, and posted with warning signs? Yes No_ | | | |
| 8. How often is station checked? Daily Other week & | | | |
| 9. What is the frequency of scheduled maintenance? _ a & weeder v pra wealfan (he | eli | | |
| 10. Are valves exercised? Yes No_Frequency | | | |
| 11. Are inspection and maintenance records maintained? Yes No | | | |
| 12. Flow metered? YesNo_X; TypeRecorded? Y_N | | | |
| 13. Does each pump have an hour meter? Yes \(\subseteq No | | | |
| 14. Is there a pressure gauge on the pump discharge? Yes No_1 | | | |
| 15. Is there an alarm system? Yes No | | | |
| 15a. (If yes, type: radio telemetry; phone dialer; local audible/visual | | | |
| 16. Alternate power source available? Yes No | | | |
| 16a. If yes, type: station. generator; port. generator; separate utility | | | |
| 17 Does this station have a by-pass? Y_ N 1 (where to?) | | 3 | |
| 18 Does this station have an emergency holding basin? Yes No | | | |
| 19. Does this station have a portable pump connection? YesNo | | | |
| 19a. If so, is pump available? YesNo; pump operable? YesNo | | | |
| 20. Does this facility have adequate spare parts inventory? Yes No | | | |

a bighistation have SLANA

| 725-01 20 10 10 10 20 20 10 10 10 10 10 10 10 10 10 10 10 10 10 | <u>, </u> | |
|--|--|--|
| 21. Are there adequate safety provisions such as guard rails, catch nets, or | | |
| anti-falling devices? Yes No | | |
| 22. Is there an approved Confined Space Entry Program? Yes No | | |
| 23 Are electrical main-disconnects outside of wetwell / drywell? Yes No_ | | |
| 24. Are shut off valves easily accessible? Yes No | | |
| 25. Does the access road meet Chapter 8 requirements? Yes_No_ N A | | |
| 26. Outside appearance (groundskeeping, painting, etc.) GF, P | | |
| 27. Inside housekeeping: GL, F_, P_ | | |
| 28. Ventilation system: N/A_, GF_, P_, X_ | | |
| 29. Heater: N/A, G, F, P, X | | |
| 30. Dehumidifier: N/A, G, F, P, X | | |
| 31. Air Conditioner: N/A, G, F, P, X | | |
| 32. Control Panel: N/AGF_, P, X | | |
| 33. Sump Pump: N/A G_, F_, P_, X_ | | |
| 34. Pumps: GL, F_, P_, X_ | | |
| 35. Air Compressors: #N/A_L, G, F, P, X | | |
| 36. Floats: # N/A G F P , X 37. Ultra Sonic Sensor: N/A G F , P , X | | |
| 37. Ultra Sonic Sensor: N/AL, G F, P, X | | |
| 38 Is lighting adequate? Yes I No. | | |
| 39. Is there a water supply source available for cleaning? YesNo_K m. shill | | |
| 40. Are chemicals routinely added at this station? Yes No | | |
| 40a. If so, list chemical and purpose: | S | |
| 41. What are the most common problems the Operator has had with the lift | | |
| station? | | |
| out in weather majuren and | | |
| | | |
| Comments: | | |
| J | | |
| | | |
| | | |

Missouri Department of Natural Resources Sanitary Sewer Overflow Inspection

Cameras and flashlights can go in, but staff are prohibited from entering manholes.

Manhole Visual Inspection Checklist

The primary purpose of this checklist is to evaluate a community's sanitary sewer system to determine if proper operation and maintenance is being performed and whether there are sanitary sewer overflows (SSOs) that are occurring (whether reported or not). During an SSO inspection, the inspector should attempt to observe at least five manholes per community. The goal should be to observe a sample of the different types and ages of manholes. For example, can you observe one or more manholes that previously overflowed, one of the oldest manholes, one of the deepest, one near a receiving stream, one at a location low in the collection-system watershed, one brick, one concrete, etc. Do not forget to take a picture of the cover and the inside.

| Inspection Date: 5-1-17 Weather: 5000 | Draw the inlet/outlet pipes, etc. |
|---|-----------------------------------|
| Manhole No.: | N / |
| Location: 6487 Colay | |
| Sewershed: | |
| GPS coor.: | |
| Downstream manhole no.: Distance to next manhole: \$\sigma \chi \chi \chi\$ | |
| Depth to channel invert: 12 fb | |
| Material: Brick, Precast, Block Masonry, | |
| Cast-in-Place Concrete, Coated, Other: | W E |
| Cover diameter: 2 4 7 | |
| Approx. dist. to stream: 1/2 mile | |
| Surrounding area: Pavement, Lawn, Field, | |
| Wooded, Gravel, Other: | |
| Pipe Data | |
| Diameter Material Depth Lined? Condition | |
| from rim of seal? | s |
| Outlet 84 (la 11.56) - Coat Inlet 1 84 (la 11.56) - Coat | _ Cover |
| Inlet 2 | Frame |
| Inlet 3 | Rim elevation |
| Inlet 4 | Adjusting Rings Chimney |
| Is there any evidence of a recent overflow? | Cone Section |
| Utility lines running through the manhole? | Steps |
| Is the cover below ground level? | Joint Section |
| Subject to stream flooding? Unlikely, occasionally, frequent. | |
| Subject to ponding? Unlikely, occasionally, frequent. | Bench Barrel |
| Depth (inches) Area (sq.ft.) | Section |
| | |
| Holes in manhole cover? | |
| Are solids accumulating? | Channel Invert |
| on bench, on steps, or in channel | |
| Cover misaligned? | ▲ Base |
| Is there staining indicating I&I? Is there Great | se or solids buildup?//> |
| Odor? Rooting? Flow observation (slow/b | packed up)? |
| Discuss the structural integrity: 600 Other (e.g., bricks falling in, cracks/pitting in concrete, corrosion, joint seals) | Miscellaneous Problems: |
| 14 | |

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| Inspection Date: Weather: | Draw the inlet/outlet pipes, etc. |
|--|-----------------------------------|
| Manhole No.: | N / |
| Location: 35 20 Carb None Cove | |
| Sewershed: | |
| GPS coor.: | |
| Downstream manhole no.: | $+$ \times $+$ \times $+$ |
| Distance to next manhole: 6081. | |
| Depth to channel invert: 10 19 | |
| Depth to channel invert: 10 fg Material: Brick Precast, Block Masonry, | W |
| Cast-in-Place Concrete, Coated, Other: | |
| Cover diameter: 249 | |
| Approx. dist. to stream: | |
| Surrounding area: Pavement, Lawn, Field, | |
| Wooded, Gravel, Other: | |
| Pipe Data | |
| Diameter Material Depth from rim Lined? Condition of seal? | |
| Outlet 1011 PVC 95 - 900d | Z s |
| Inlet 1 6 1 Dre g.C - Good | Frame |
| Inlet 2 6 DUC 9.5 - Som | Rim elevation |
| Inlet 3 | F |
| Inlet 4 | Adjusting Rings Chimney |
| Is there any evidence of a recent overflow? | Cone Section |
| Utility lines running through the manhole? | |
| A - | Joint Steps Cone Section |
| Is the cover below ground level? | |
| Subject to stream flooding? Unlikely occasionally, frequent. | |
| Subject to ponding? Unlikely, occasionally, frequent. | Bench Barrel |
| Depth (inches) Area (sq.ft.) | Section |
| | [|
| Holes in manhole cover? | Channel |
| Are solids accumulating? | Invert |
| on bench, on steps, or in channel | Page 1 |
| Cover misaligned? | |
| Is there staining indicating I&I? Is there Grea | se or solids buildup? |
| Odor? Rooting? Flow observation (slow/b | packed up)? |
| Discuss the structural integrity: 900 Other | Miscellaneous Problems: |
| (e.g, bricks falling in, cracks/pitting in concrete, corrosion, joint seals) | |
| | |

Manholes are considered confined spaces and department staff are not to enter them. DO NOT ENTER ANY CONFINED SPACE FOR ANY REASON!

Cameras and flashlights can go in, but staff are prohibited from entering manholes.

Missouri Department of Natural Resources Sanitary Sewer Overflow Inspection

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| Inspection Date: 5-9-17 Weather: Soung | Draw the inlet/outlet pipes, etc. | | |
|--|-----------------------------------|--|--|
| Manhole No.: | N . | | |
| Location: 3388 Charlene | | | |
| Sewershed: | | | |
| GPS coor.: | | | |
| Downstream manhole no.: | | | |
| Distance to next manhole: 70 \$1. Depth to channel invert: 87 | | | |
| Material: Brick Precast, Block Masonry, | | | |
| Cast-in-Place Concrete, Coated, Other: | W E | | |
| Cover diameter: 2 4 9 | | | |
| Approx. dist. to stream: | | | |
| Surrounding area: Pavement, Lawn, Field, | | | |
| Wooded, Gravel, Other: | | | |
| Pipe Data | | | |
| Diameter Material Depth from rim Lined? Condition of seal? | | | |
| Outlet 84 Concerte 7.5 NO 900.4 | ls \ | | |
| Inlet 1 64 4 7.5 - Rook | Frame | | |
| Inlet 2 69 y 2.1 - Gand | Rim elevation | | |
| Inlet 3 | | | |
| Inlet 4 A | djusting Rings — Chimney | | |
| Is there any evidence of a recent overflow? | Cone Section | | |
| Utility lines running through the manhole? | Steps Cone | | |
| Is the cover below ground level? | Joint Section | | |
| Subject to stream flooding? Unlikely, occasionally, frequent. | | | |
| Subject to ponding? Unlikely, occasionally, frequent. | Bench Barrel | | |
| Depth (inches) Area (sq.ft.) | Section | | |
| Holes in manhole cover? | | | |
| Are solids accumulating? | Channel | | |
| on bench, on steps, or in channel | → Base | | |
| Cover misaligned? | Disse | | |
| Is there staining indicating I&I? Is there Grease | e or solids buildup? | | |
| Odor? Rooting? Flow observation (slow/backed up)? wrong! | | | |
| Discuss the structural integrity: for the Other I (e.g, bricks falling in, cracks/pitting in concrete, corrosion, joint seals) | Miscellaneous Problems: | | |